

<input checked="" type="checkbox"/> Rejected	(Through numeral) Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal
<input checked="" type="checkbox"/> Allowed	+ Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected

Claim	Date	Claim	Date	Claim	Date
1	7/15/62	51		101	
2		52		102	
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49		99		149	
50		100		150	